

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM****NOVEMBER 6, 2007**MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

07 C 6272

In the Matter of

Case Number:

CaremarkPCS Health, L.P. v. Walgreen Co.

**JUDGE FILIP
MAGISTRATE JUDGE KEYS**

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

CaremarkPCS Health, L.P., plaintiff

CEM

NAME (Type or print) Peter J. Kocoras	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ Peter J. Kocoras	
FIRM Winston & Strawn LLP	
STREET ADDRESS 35 West Wacker Drive	
CITY/STATE/ZIP Chicago, IL 60601	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 6216374	TELEPHONE NUMBER (312) 558-5600
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	